2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2019
Secretary of State
3166297329CC

DOCUMENT# P16000003784

Entity Name: CLAIM YOUR MONEY INC.

Current Principal Place of Business:

1707 EAST BEARSS AVE
SUITE B
TAMPA, FL 33613

Current Mailing Address:

P O BOX 242
GULF BREEZE, FL 32562 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STANSELL, JR, O.B. ESQ
1707 EAST BEARSS AVE
SUITE A
TAMPA, FL 33613 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PSTD
Name	STANSELL, MOLCIE B
Address	1707 EAST BEARSS AVE, SUITE B
City-State-Zip:	TAMPA FL 33613

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MOLCIE B STANSELL PRESIDENT 02/09/2019

Electronic Signature of Signing Officer/Director Detail — Date